

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10830194
APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2		1				
3	2					
4	2					
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TOTAL IND.	1					
TOTAL DEP.	13					
TOTAL CLAIMS	14					

	IND	DEP	IND	DEP	IND	DEP
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